

20150426 JUN 2006

**APPLICATION DATA SHEET****Application Information**

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?:: None

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: POLYORGANOSILOXANE MONOCOMPONENT  
COMPOUND CROSSLINKING INTO SILICONE  
ELASTOMER

Attorney Docket Number:: 1004900-000278

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: France

Status:: Full Capacity

Given Name:: Marc

Middle Name::

Family Name:: CHAUSSADE

Name Suffix::

City of Residence:: Villeurbanne

State or Province of Residence::

Country of Residence:: France

Street of Mailing Address:: 24, rue Billon

City of Mailing Address:: Villeurbanne

**State or Province of Mailing Address::**

**Country of Mailing Address::** France

**Postal or Zip Code of Mailing Address::** 69100

**Applicant Authority Type::** Inventor

**Primary Citizenship Country::** France

**Status::** Full Capacity

**Given Name::** Nathalie

**Middle Name::**

**Family Name::** GUENNOUNI

**Name Suffix::**

**City of Residence::** Irigny

**State or Province of Residence::**

**Country of Residence::** France

**Street of Mailing Address::** 5, rue de la Fondation Dorothée Petit

**City of Mailing Address::** Irigny

**State or Province of Mailing Address::**

**Country of Mailing Address::** France

**Postal or Zip Code of Mailing Address::** 69540

## **Correspondence Information**

Correspondence Customer Number:: **21839**

Phone Number:: 703.836.6620

Fax Number: 703.836.2021

## **Representative Information**

Representative Customer Number:: **21839**

## **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application:: Parent Filing Date::</b>
This Application	National Stage of	PCT/FR2004/003327 12/21/04

## **Foreign Priority Information**

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>
France	0315286	12/23/03	Yes

## **Assignee Information**

Assignee Name:: RHODIA CHIMIE

**Street of Mailing Address::** 26 quai Alphonse Le Gallo  
**City of Mailing Address::** Boulogne Billancourt  
**State or Province of Mailing Address::**  
**Country of Mailing Address::** France  
**Postal or Zip Code of Mailing Address::** 92100